	this form, together with	th applicable fe	or <u>Fax</u>	Mail Stop ISSUE Commissioner for P.O. Box 1450 Alexandria, Virg (703) 746-4000	or Patents inia 22313-1450	,	
INSTRUCTIONS: This for appropriate. All further co- indicated unless corrected maintenance fee notification	rrespondence including the below on director otherwise ins.	Patent, advance order in Block 1, by (a)	E FEE and PUBLIC lers and notification specifying a new of	CATION FEE (if requ of maintenance fees ver correspondence address;	ired). Blocks 1 through 5 vill be mailed to the curre and/or (b) indicating a se	should be completed where ent correspondence address as eparate "FEE ADDRESS" for	
	CE ADDRESS (Note: Use Block I for 2590 12/15/2004	any change of address)		Note: A certificate of Fee(s) Transmittal. Th papers. Each additional have its own certificate	mailing can only be used is certificate cannot be used paper, such as an assign of mailing or transmission	for domestic mailings of the d for any other accompanying ment or formal drawing, must n.	
EDWARDS & A P.O. BOX 55874 BOSTON, MA 02	205			I hereby certify that the States Postal Service vaddressed to the Mai transmitted to the USP	tificate of Mailing or Tra is Fee(s) Transmittal is be with sufficient postage for Stop ISSUE FEE addre TO (703) 746-4000, on th	nsmission ging deposited with the United first class mail in an envelope ses above, or being facsimile date indicated below.	
15/2005 RMEBRAH1 00000	141 041105 09787196			Michelle P.		- (Depositor's name)	
FC:1501 1400.00 1				munel	UP. (MI	(Signature)	
FC:8001 30.00 j	)A			March 10,	2005	(Date)	
APPLICATION NO.	FILING DATE	F	FIRST NAMED INVEN	NTOR	ATTORNEY DOCKET NO	. CONFIRMATION NO.	
09/787,196	04/26/2001		Ichiro Hirao		55729	6079	
APPLN. TYPE	SMALL ENTITY	ASE PAIR  ISSUE FE	E P	UBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE	
1	NO	\$1400	•	\$0	\$1400	03/15/2005	
nonprovisional	EXAMINER						
nonprovisional	1INER	ART UNI	T C	LASS-SUBCLASS	,		
nonprovisional	MINER MICHAEL C	ART UNI	т с	LASS-SUBCLASS . 536-025300	ľ		
nonprovisional  EXAM  HENRY, M  1. Change of correspondence CFR 1.363).  Change of correspondence CFR 1.363.  "Fee Address" indica		1623 ee Address" (37 Correspondence	2. For printing on (1) the names of or agents OR, alte (2) the name of a	the patent front page, li- up to 3 registered paten matively, single firm (having as a y tattorneys or agent). If	t attorneys 1	er F. Corless n B. Alexander, Ph ards & Angèll, LLF	

Japan Science & Technology Agency

Saitama, Japan

4a. The following fee(s) are enclosed:	4b. Payment of Fee(s):				
ssue Fee	A check in the amount of the fee(s) is enclosed.				
Publication Fee (No small entity discount permitted)	Payment by credit card. Form PTO-2038 is attached.				
Advance Order - # of Copies10	The Director is hereby authorized by charge the required fec(s), or credit any overpayment, to Deposit Account Number 04-1105 (enclose an extra copy of this form).				
5. Change in Entity Status (from status indicated above)  a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27.	b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).				
The Director of the USPTO is requested to apply the Issue Fee and PuNOTE: The Issue Fee and Publication Fee (if required) will not be accorded interest as shown by the records of the United States Palent and Frage	ablication Fee (if any) or to re-apply any previously paid issue fee to the application identified above. cepted from anyone other than the applicant; a registered attorney or agent; or the assignee or other party in mark Office.				
Authorized Signature	Date March 10, 2005				
	Ph.D. 48,399				

an application. Confidentiality is governed by 37 CFR 1.311. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450.

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

PTO/SB/17 (12-04v2)
Approved for use through 7/31/2006. OMB 0651-0032

Complete If Known   Fee pursuance to the Consolidated Appropriations Act, 2008 (Fig. 4416)   FEE TRANSMITTAL   For FY 2005   First Named Inventor   Ichiro Hirao   Examined Inventor   Ichiro Hirao   Ichiro Hira	Under the Paperwork Redu	ection Act of 1995	, no person are r	equired to	respond to a collec	tion of informa	tion unless it displa	ys a valid OMB c	ontrol number	
FEE TRANSMITTAL For FY 2005    Applicant claims small entity status. See 37 CFR 1.27   Art Unit   1623   TOTAL AMOUNT OF PAYMENT   (\$) 1,470.00   Attorney Docket No.   55729 (71526)   METHOD OF PAYMENT (check all that apply)   Check   Credit Card   Money Order   None   Other (please identify)   Check   Credit Card   Money Order   None   Other (please identify)   Check   Credit Card   Money Order   None   Other (please identify)   Check   Credit Card   Money Order   None   Other (please identify)   Check   Credit Card   Money Order   None   Other (please identify)   Charge fee(s) indicated below   Charge any additional fee(s) or underpayment of fee(s) under 37 CFR 1.16 and 1.17   For the above identified deposit account, the Director is hereby authorized to: (check all that apply)   X Charge any additional fee(s) or underpayment of fee(s) under 37 CFR 1.16 and 1.17   FEE CALCULATION    1. BASIC FILING, SEARCH, AND EXAMINATION FEES   Fee (5)   Fee (6)	Effective on 12/08/2004. Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).									
For FY 2005    First Named Inventor   Examiner Name   M. C. Henry										
Examiner Name   M. C. Henry   Art Unit   1623							<del></del>			
Applicant claims small entity statius. See 37 CFR 1.27   At Unit   1623	For	FY 200	5							
METHOD OF PAYMENT (check all that apply)					Examiner Nam	ne				
Check	Applicant claims small entity status. See 37 CFR 1.27				Art Unit 1623					
Check Credit Card Money Order Deposit Account Number Od-1105 Deposit Account Name Edwards & Angell, LLP  For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)    Charge fee(s) indicated below Charge fee(s) indicated below Charge fee(s) indicated below Charge any additional fee(s) or underpayment of See(s) under 37 CFR 1.16 and 1.17    FEE CALCULATION	TOTAL AMOUNT OF PA	/MENT	<b>(\$)</b> 1,470.0	00	Attorney Dock	et No.	55729 (7152	<u>8)</u>		
Deposit Account Deposit Account Number O4-1105   Deposit Account Name   Edwards & Angell, LLP	METHOD OF PAYMEN	IT (check all t	hat apply)							
Deposit Account Deposit Account Number O4-1105   Deposit Account Name   Edwards & Angell, LLP	Check Credit	Card N	Aoney Order	No	ne Othe	r (please ider	ntify):			
For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)    X   Charge fee(s) indicated below   Charge fee(s) indicated below, except for the filing fee     X   Charge fee(s) indicated below, except for the filing fee     X   Charge fee(s) indicated below, except for the filing fee     X   Charge fee(s) indicated below, except for the filing fee     X   Charge fee(s) indicated below, except for the filing fee     X   Charge fee(s) indicated below, except for the filing fee     X   Charge fee(s) indicated below, except for the filing fee     X   Charge fee(s) indicated below, except for the filing fee     X   Charge fee(s) indicated below, except for the filing fee     X   Charge fee(s) indicated below, except for the filing fee     X   Charge fee(s) indicated below, except for the filing fee     X   Charge fee(s) indicated below, except for the filing fee     X   Charge fee(s) indicated below, except for the filing fee     X   Charge fee(s) indicated below, except for the filing fee     X   Charge fee(s) indicated below, except for the filing fee     X   Charge fee(s) indicated below, except for the filing fee     X   Charge fee(s) indicated below, except for the filing fee     X   Charge fee(s) indicated below, except for the filing fee     X   Charge fee(s) indicated below, except for the filing fee     X   Charge fee(s) indicated below, except for the filing fee     X   Charge fee(s) indicated below, except for the filing fee     X   Charge fee(s) indicated below, except for the filing fee     X   Charge fee(s) indicated below, except for the filing fee     X   Charge fee(s) indicated below, except for the filing fee     X   Charge fee(s) indicated below, except for the filing fee     X   Charge fee(s) indicated below, except for the filing fee     X   Charge fee(s) indicated below, except for faels filing the fee     X   Charge fee(s) indicated below, except for faels filing surchard filing fee     X   Charge fee(s) indicated below, except for faels filing surch	X Deposit Account Der	لـــا		Deposit Acc	count Name:	E	dwards & And	ell. LLP		
Charge fee(s) indicated below   Charge fee(s) indicated below, except for the filing fee   Charge any additional fee(s) or underpayment of   x   Credit any overpayments   x   Credit an	J									
Telegraphic		•		on cotor is		•		•	e filina fee	
Telegic   Company   Fee   Co		•		umont of	$\vdash$				·g	
1. BASIC FILING, SEARCH, AND EXAMINATION FEES   Small Entity   Fee (\$)   F				yment or	x Cred	lit any overp	payments			
Filt   State	FEE CALCULATION					•		ı		
Papilication Type	1. BASIC FILING, SEARC	H, AND EXAM	INATION FE	ES						
Application Type		FILIN		SE						
Utility	Application Type	Fee (\$)		Fee (\$					aid (\$)	
Plant	Utility					200				
Reissue 300 150 500 250 600 300  Provisional 200 100 0 0 0 0 0 0  2. EXCESS CLAIM FEES Fee (\$) 5 Fee (\$) 7	Design	200	100	100	50	130	65			
Provisional   200   100   0   0   0   0   0   0   0   0	Plant	200	100	300	150	160	. 80			
2. EXCESS CLAIM FEES	Reissue	300	150	500	250	600	300			
Fee Description  Each claim over 20 (including Reissues)  Each independent claim over 3 (including Reissues)  Multiple dependent claims  Total Claims  Extra Claims  Fee (\$) Fee Paid (\$)  Indep. Claims  Extra Claims  Fee (\$) Fee Paid (\$)  Indep. Claims  Extra Claims  Fee (\$) Fee Paid (\$)  Indep. Claims  Extra Claims  Extra Claims  Fee (\$) Fee Paid (\$)  Indep. Claims  Extra Claims  Fee (\$) Fee Paid (\$)  Indep. Claims  Extra Claims  Fee (\$) Fee Paid (\$)  Indep. Claims  Extra Claims  Fee (\$) Fee Paid (\$)  Indep. Claims  Extra Claims  Fee (\$) Fee Paid (\$)  Indep. Claims  Extra Claims  Fee (\$) Fee Paid (\$)  Indep. Claims  Extra Claims  Fee (\$) Fee Paid (\$)  Indep. Claims  Extra Claims  Fee (\$) Fee Paid (\$)  Indep. Claims  Extra Claims  Fee (\$) Fee Paid (\$)  Indep. Claims  Extra Claims  Fee (\$) Fee Paid (\$)  Indep. Claims  Extra Claims  Fee (\$) Fee Paid (\$)  Indep. Claims  Extra Claims  Fee (\$) Fee Paid (\$)  Indep. Claims  Extra Claims  Fee (\$) Fee Paid (\$)  Indep. Claims  Extra Claims  Fee (\$) Fee Paid (\$)  Indep. Claims  Extra Claims  Fee (\$) Fee Paid (\$)  Indep. Claims  Extra Claims  Extra Claims  Fee (\$) Fee Paid (\$)  Indep. Claims  Extra Claims  Indep. Claims  Extra Claims  Extra Claims  Fee (\$) Fee Paid (\$)  Indep. Claims  Extra Claims  Extra Claims  Indep. Claims  Extra Claims  Extra Claims  Fee (\$) Fee Paid (\$)  Indep. Claims  Extra Claims  Extra Claims  Indep. Claims  Extra Claims  Extra Claims  Extra Claims  Fee (\$) Fee Paid (\$)  Indep. Claims  Extra Claims  Extra Claims  Extra Claims  Fee (\$) Fee Paid (\$)  Indep. Claims  Extra	Provisional	200	100	0	0	0	0			
Each claim over 20 (including Reissues)  Each independent claim over 3 (including Reissues)  Multiple dependent claims  Total Claims  Extra Claims  Extra Claims  Fee (\$)  Fee Paid (\$)  Indep. Claims  Setra Claims  Fee (\$)  Fee Paid (\$)  Indep. Claims  Fee (\$)  Fee Paid (\$)  If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).  Total Sheets  Extra Sheets  Number of each additional 50 or fraction thereof. Fee (\$)  Fee Paid (\$)  Fee Paid (\$)  Fee Paid (\$)  Total Sheets  Fee (\$)  Fee Paid (\$)  Fee Paid (\$)  Total Sheets  Fee (\$)  Fee Paid (\$)  Total Sheets  Fee Paid (\$)  Total Sheets  Fee (\$)  Fee Paid (\$)  Fee Paid (\$)  Total Sheets  Fee (\$)  Fee Paid (\$)  Fee Paid (\$)  Fee Paid (\$)  Total Sheets  Fee (\$)  Fee Paid (\$)  Fee Paid (\$)  Fee Paid (\$)  Total Sheets  Fee (\$)  Fee Paid (\$)  Fee Paid (\$)  Fee Paid (\$)  Total Sheets  Fee (\$)  Fee Paid (\$)	2. EXCESS CLAIM FEES							-		
Each independent claims over 3 (including Reissues)  Multiple dependent claims  Total Claims  Extra Claims  -20 =										
Multiple dependent claims  Total Claims  Extra Claims  Fee (\$)  Fee Paid (\$)  Multiple Dependent Claims  Fee (\$)  Fee Paid (\$)  Indep. Claims  Extra Claims  Fee (\$)  Fee Paid (\$)  Fee Paid (\$)  Sample Claims  Fee (\$)  Fee Paid (\$)  Fee Paid (\$)  Application and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).  Total Sheets  Extra Sheets  Number of each additional 50 or fraction thereof. Fee (\$)  Fee Paid (\$)  Total Sheets  Fee Paid (\$)  Fee Paid (\$)  Total Sheets  Fee Paid (\$)  Fee Paid (\$)  Total Sheets  Fee Paid (\$)  Fee Paid (\$)  Total Sheets  Fee Paid (\$)  Fee Paid (\$)  Fee Paid (\$)  Total Sheets  Fee Paid (\$)  Total Sheets  Fee Paid (\$)  Fee Paid (\$)  Fee Paid (\$)  Fee Paid (\$)  Total Sheets  Fee Paid (\$)  Fee	·	-								
Total Claims    Extra Claims   Fee (\$)   Fee Paid (\$)			ig Keissues)							
Indep. Claims Extra Claims Fee (\$) = Fee Paid (\$)  3. APPLICATION SIZE FEE  If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).  Total Sheets Extra Sheets Number of each additional 50 or fraction thereof Fee (\$) Fee Paid (\$)  - 100 = /50 (round up to a whole number) x = 4. OTHER FEE(S)  Non-English Specification, \$130 fee (no small entity discount)  Other (e.g., late filing surcharge): 1501 Utility issue fee	• •	· · ·			raid (\$) Mu				100	
Indep. Claims    Extra Claims   Extra Claims   Fee (\$)   =				1001					)	
3. APPLICATION SIZE FEE  If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).  Total Sheets Extra Sheets Number of each additional 50 or fraction thereof Fee (\$) Fee Paid (\$)  - 100 =						-	33 177		•	
3. APPLICATION SIZE FEE  If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).  Total Sheets	Indep. Claims Extra	Claims F	ee (\$)	Fee I	Paid (\$)				<del></del>	
If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).  Total Sheets	-3=	x _	= _							
listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).  Total Sheets   Extra Sheets   Number of each additional 50 or fraction thereof   Fee (\$)   Fee Paid (\$)    - 100 =			1100 1							
sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).  Total Sheets Extra Sheets Number of each additional 50 or fraction thereof (round up to a whole number) x =   4. OTHER FEE(S) Fee Paid (\$)  Non-English Specification, \$130 fee (no small entity discount)  Other (e.g., late filing surcharge): 1501 Utility issue fee 8001 Printed copy of patent w/o color 8001 Printed copy of patent assignment, agreement or 40.00  SUBMITTED BY  Signature Registration No (Attorney/Agent) 48,399 Telephone (617) 439-4444  Name (Print/Type) John B. Alexander, Ph.D. Date March 10, 2005										
4. OTHER FEE(S)  Non-English Specification, \$130 fee (no small entity discount)  Other (e.g., late filing surcharge):  1501 Utility issue fee  1,400.00 8001 Printed copy of patent w/o color 8001 Recording each patent assignment, agreement or  1501 Utility issue fee  1,400.00 8001 Printed copy of patent w/o color 8001 Registration No. (Attorney/Agent)  Registration No. (Attorney/Agent)  Alexander, Ph.D.  I hereby certify that this correspondence is being deposited with the U.S. Postal Service as Express Mail, Airbill No. EV517930785US, in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450, on the date shown below.							, ,			
A. OTHER FEE(S)  Non-English Specification, \$130 fee (no small entity discount)  Other (e.g., late filing surcharge):  1501 Utility issue fee 8001 Printed copy of patent w/o color 8021 Recording each patent assignment, agreement or  Registration No. (Attorney/Agent)  Name (Print/Type)  I hereby certify that this correspondence is being deposited with the U.S. Postal Service as Express Mail, Airbill No. EV517930785US, in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450, on the date shown below.	Total Sheets	Extra Sheets	Number	of each a	dditional 50 or f	raction there	of Fee (\$)	Fee P	aid (\$)	
Non-English Specification, \$130 fee (no small entity discount)  Other (e.g., late filing surcharge): 1501 Utility issue fee 8001 Printed copy of patent w/o color 30.00 8021 Recording each patent assignment, agreement or 40.00  SUBMITTED BY  Signature Registration No. (Attorney/Agent) 48,399 Telephone (617) 439-4444  Name (Print/Type) John B. Alexander, Ph.D. Date March 10, 2005  I hereby certify that this correspondence is being deposited with the U.S. Postal Service as Express Mail, Airbill No. EV517930785US, in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450, on the date shown below.	- 100 =		/50		(round up to a w	hole number)	) x	. = <u> </u>		
Other (e.g., late filing surcharge): 1501 Utility issue fee 8001 Printed copy of patent w/o color 30.00 8021 Recording each patent assignment, agreement or 40.00  SUBMITTED BY  Signature Registration No. (Attorney/Agent) 48,399 Telephone (617) 439-4444  Name (Print/Type) John B. Alexander, Ph.D. Date March 10, 2005  I hereby certify that this correspondence is being deposited with the U.S. Postal Service as Express Mail, Airbill No. EV517930785US, in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450, on the date shown below.	, ,							Fees F	Paid (\$)	
SUBMITTED BY Signature Registration No. (Attorney/Agent) Name (Print/Type) Registration No. (Attorney/Agent) Name (Print/Type) Registration No. (Attorney/Agent) Date March 10, 2005  I hereby certify that this correspondence is being deposited with the U.S. Postal Service as Express Mail, Airbill No. EV517930785US, in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450, on the date shown below.	Non-English Specificat	ion, \$130 fe	e (no small er	ntity disc	ount)			1 40	00.00	
Registration No. (Attorney/Agent)   A8,399   Telephone   (617) 439-4444     Name (Print/Type)   John B. Alexander, Ph.D.   Date   March 10, 2005     I hereby certify that this correspondence is being deposited with the U.S. Postal Service as Express Mail, Airbill No. EV517930785US, in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450, on the date shown below.	Other (e.g., late filing s	urcharge): 13	001 Othley is:	copy of i	patent w/o col	or				
Registration No. (Attorney/Agent) 48,399 Telephone (617) 439-4444  Name (Print/Type) John B. Alexander, Ph.D. Date March 10, 2005  I hereby certify that this correspondence is being deposited with the U.S. Postal Service as Express Mail, Airbill No. EV517930785US, in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450, on the date shown below.							eement or			
Registration No. (Attorney/Agent) 48,399 Telephone (617) 439-4444  Name (Print/Type) John B. Alexander, Ph.D. Date March 10, 2005  I hereby certify that this correspondence is being deposited with the U.S. Postal Service as Express Mail, Airbill No. EV517930785US, in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450, on the date shown below.	SUBMITTED BY	111	1 10							
Name (Print/Type) John B. Alexander, Ph.D.  I hereby certify that this correspondence is being deposited with the U.S. Postal Service as Express Mail, Airbill No. EV517930785US, in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450, on the date shown below.	1//	HVIX				48.399	Telephone	(617) 439	-4444	
I hereby certify that this correspondence is being deposited with the U.S. Postal Service as Express Mail, Airbill No. EV517930785US, in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450, on the date shown below.		Alexander 5	Ph D		(Attorney/Agent)	,,,,,				
in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450, on the date shown below.	Name (Fill orype) 30111 D.	Alexander, 1	11.0.	,	***		Date	- Iviai Cii TO,		
in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450, on the date shown below.	V									
in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450, on the date shown below.	<del></del>									
$O(A \cup A \cup$										
				/\		1, 10,10 E			**	